

# THE GOWRIE (QLD) INC

## MANAGING A HIGH TEMPERATURE POLICY

### CONSIDERATIONS:

QIAS	Principle 6.6
REGS	Child Care Act 2002 Section 76 Child Care Regulation 2003 Sections 56 / 101

### POLICY STATEMENT:

To manage illness in the service with particular regard to high temperature in young children. To undertake to follow parents' /guardian's instructions without compromising the best interests of the child.

### RELEVANT FORMS/MATERIAL:

- ***The Kindergarten's Illness Form***
- ***The Kindergarten's Record of Infectious Diseases Book***
- ***The Kindergarten's Child Enrolment Form***
- ***Administration of Emergency Paracetamol Form***
- ***Exclusion of Sick Children & Sick Staff Policy***

### SOURCES:

- Morton, Sandy (2001) *Policies to Go By for Child Care Services: Building a Firm Foundation*. Children's Services Support Unit Inc: Perth.
- National Health and Medical Research Council (2005) *Staying Healthy in Child Care: Preventing Infectious Diseases in Child Care (4th Ed)* Commonwealth of Australia: Canberra
- Children's Hospital at Westmead, *Parents Factsheets (2006)*  
[www.chw.edu.au/parents/factsheets](http://www.chw.edu.au/parents/factsheets)

Reviewed : March 2011

Date to be Reviewed: March 2012

<b>IMPLEMENTATION:</b>	
<b>REMEMBER</b>	A high temperature in young children is often the first symptom of illness or infection. As children are often unable to explain symptoms if they feel unwell and staff need to be aware of signs and symptoms of illness. <b>Children's temperatures can alter rapidly.</b>
<b>WHAT YOU NEED TO KNOW</b>	<p><b>FEVER</b></p> <ul style="list-style-type: none"> <li>• Fever is an oral temperature greater than 37.5 C</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• An auxiliary (armpit) temperature greater than 37 C.</li> </ul>
<b>WHAT YOU SHOULD DO</b>	<p><b>STEPS TO REDUCE A HIGH TEMPERATURE:</b></p> <ol style="list-style-type: none"> <li>1. <b>Remove the child's excess clothing</b> (eg jumpers and jackets) whilst taking into account the temperature of the room. Ensure the child is not shivering.</li> <li>2. <b>Sponge</b> the child with lukewarm water, or</li> <li>3. Gently <b>fan</b> the child.</li> <li>4. Encourage the child to <b>drink water</b> often or suck a cold ice block to help prevent dehydration.</li> <li>5. Constantly <b>observe and monitor</b> the child for any changes. Never leave the child unattended. Be aware that while one staff member goes through Steps 1-5, another should attend to Steps 6-7.</li> <li>6. If, after 10 minutes the child's temperature is still <b>over 37.5C</b> or if the child's temperature is rapidly rising, then check the enrolment form for permission to <b>administer paracetamol</b> eg Panadol.</li> <li>7. <b>Contact</b> the parent/ guardian/emergency contact to advise that the child has a high temperature and to ask for the child to be collected. <ul style="list-style-type: none"> <li>- If written permission has not been given on the Enrolment Form ask the parent/guardian/emergency contact if they wish staff to administer a <b>single dose of paracetamol</b> while waiting for the child to be collected.</li> <li>- If written or verbal permission has not been given to administer paracetamol, inform the parent/guardian/emergency contact that <b>if the child's temperature continues to rise to 39.0 C degrees or higher while waiting for collection, then an ambulance will be called.</b></li> <li>- If <b>written permission</b> has been given on the Enrolment Form inform the parent/guardian/emergency contact that staff will <b>administer a single dose of paracetamol</b> while waiting for the child to be collected. Staff are to check with parent/ guardian /emergency contact if the child has had a dose administered earlier in the day and record this on administration form, If they are unable to check this and the child has been in care for four hours administration is able to be followed as per directions .</li> </ul> </li> </ol>

	<p>8. If parent/guardian/emergency contact cannot be located to give verbal permission and/or collect the child and if the child's temperature reaches over 39.0 C, the Director will call an ambulance and continue trying to locate parent/guardian/emergency contact. When a child is being transported to hospital the Director or 2yr minimum qualified staff member will travel with the child and carry all supporting documentation.</p> <p>If the Director / staff member is unable to travel with the child to the hospital to ensure that staffing requirements are still meet at the service, documentation is to be handed to the emergency personal and the President/CGB informed that the child is going to travel without staff. The President /CGB will decide if additional staffing can be arranged within a short time period.</p> <p>9. Where permission has been given to administer paracetamol follow the procedure for <b><i>Administering Emergency Paracetamol.</i></b></p> <p>10. Complete the <b><i>Illness Report</i></b> and give a copy to the parent/guardian/emergency contact on arrival /or to the staff member who accompanies the child in the ambulance to Hospital.</p> <p>Please note that in instances of children being transported to hospital and inability to contact parent/guardian/emergency contact, the President (if not contactable then the CGB) is to be notified immediately.</p>
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